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Fill in this information to	identify your case:		
United States Bankruptcy	Court for the:		
SOUTHERN DISTRICT C	F NEW YORK		
Case number (if known)	17-22964	Chapter you are filing under:	
		☐ Chapter 7	
		☐ Chapter 11	
		☐ Chapter 12	
		■ Chapter 13	■ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About	Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued	Caren First name	First na	me
	picture identification (for example, your driver's			
	license or passport).	Middle name	Middle	name
	Bring your picture identification to your meeting with the trustee.	Litkowski Last name and Suffix (Sr., Jr., II, III)	Last na	me and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security			
	number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7872		

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Debtor 1 Caren Litkowski Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	86 Rose Valley Road	If Debtor 2 lives at a different address:		
		Monticello, NY 12701 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Sullivan County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition,	Check one: Over the last 180 days before filing this petition, I		
		I have lived in this district longer than in any other district.	have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 Caren Litkowski Case number (if known) 17-22964

ar	Tell the Court About	Your Ba	ankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	☐ Ch	napter 7				
		☐ Ch	napter 11				
		☐ Ch	napter 12				
		■ Cł	napter 13				
3.	How you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more deta about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or more order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check was pre-printed address.					
					stallments. If you choose this of the things	s option, sign and attach the Application	on for Individuals to Pay
			but is not req applies to you	uired to, waive ur family size a	your fee, and may do so onlind you are unable to pay the	option only if you are filing for Chapte y if your income is less than 150% of the fee in installments). If you choose this to (Official Form 103B) and file it with you	the official poverty line that s option, you must fill out
			ше Аррисанс	on to riave the	Chapter 7 Filling Fee walved	(Official Form 103B) and the it with yo	our pennorn.
9.	Have you filed for bankruptco	■ No					
	last 8 years?	☐ Ye			1A/I	O-sa saada s	
			District		When When	Case number _	
			District District		When	Case number Case number	
			District		WIIGH	Case number	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	S.				
			Debtor			Relationship to you	ı
			District		When	Case number, if kn	own
			Debtor			Relationship to you	
			District		When	Case number, if kn	own
11.	Do you rent your residence?	■ No	Go to l	ine 12.			
	residence:	☐ Ye	s. Has yo	ur landlord obt	tained an eviction judgment a	against you and do you want to stay in	your residence?
				No. Go to line	12.		
				Yes. Fill out II bankruptcy pe		ction Judgment Against You (Form 10	1A) and file it with this

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Debtor 1 Caren Litkowski Case number (if known) 17-22964

Par	Report About Any Bu	sinesses `	You Own	as a Sole Proprie	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of bus	iness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Number Street City State & ZIP Code			
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code			
	it to this petition.		Chec	k the appropriate bo	x to describe your business:	
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))			
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor s deadlines. If you indicate that you are a small business debtor, you must attach your most recent operations, cash-flow statement, and federal income tax return or if any of these documents do not in 11 U.S.C. 1116(1)(B).			a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure	
	For a definition of small	No.	I am r	not filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code	11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and	■ No. ☐ Yes.	What is	the hazard?		
	identifiable hazard to public health or safety? Or do you own any	alth or safety?				
	property that needs immediate attention?			liate attention is why is it needed?		
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		s the property?				
					Number, Street, City, State & Zip Code	

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Debtor 1 Caren Litkowski

Case number (if known) 17-22964

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

		cit	

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known)

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Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to **□** \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion □ \$100,000,001 - \$500 million ■ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Caren Litkowski Signature of Debtor 2 Caren Litkowski Signature of Debtor 1 Executed on September 1, 2017 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1

Caren Litkowski

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Debtor 1 Caren Litkowski Case number (if known) 17-22964

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Linda T	irelli	Date	September 1, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
_inda Tire	lli		
rinted name			
Tirelli & W	allshein, LLP		
irm name			
50 Main St	reet		
Suite 405			
White Plai	ns, NY 10606		
lumber, Street,	City, State & ZIP Code		
Contact phone	914-732-3222	Email address	LTirelli@tw-lawgroup.com
Bar number & St	ate		

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			1 11 10 101 100						
Fill in this info	Fill in this information to identify your case:								
Debtor 1	Caren Litkowski	Caren Litkowski							
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States I	Bankruptcy Court for the:	SOUTHERN DISTRICT	OF NEW YORK						
Case number	17-22964								
(if known)									

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	500,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,274.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	503,274.00
ar	t 2: Summarize Your Liabilities		
			abilities : you owe
<u>.</u>	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	10,265.00
	Your total liabilities	\$	10,265.00
ar	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	11,989.82
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,789.82
ar	t 4: Answer These Questions for Administrative and Statistical Records		
	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	edules.
,	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Summary of Your Assets and Liabilities and Certain Statistical Information

Official Form 106Sum

the court with your other schedules.

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Debtor 1 Caren Litkowski

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

14,987.27 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill in this inform	mation to identify your case and t	his filing	j :		
Debtor 1	Caran Litkawaki				
Deptor 1	Caren Litkowski First Name Middl	lle Name	Last Name		
Dobtor 2	i iist Name iviidu	ie ivallie	Last Name		
Debtor 2 (Spouse, if filing)	First Name Midd	lle Name	Last Name		
(,9)					
United States Ba	inkruptcy Court for the: SOUTHER	RN DIST	RICT OF NEW YORK		
Case number _	17-22964				Check if this is an
					amended filing
Official Fo	rm 106A/B				
Sahadul	a A/P. Praparty				
Schedul	e A/B: Property				12/15
information. If more Answer every ques Part 1: Describe	e space is needed, attach a separate s stion. Each Residence, Building, Land, or O	sheet to the	married people are filing together, both are his form. On the top of any additional pages Estate You Own or Have an Interest In		
1. Do you own or h	have any legal or equitable interest in	any resid	ence, building, land, or similar property?		
Писл					
☐ No. Go to Part	t 2.				
Yes. Where is	s the property?				
1.1		What	is the property? Check all that apply		
196 Grand	dview Ave		Single-family home	Do not deduct secured c	laims or exemptions. Put
Street address,	if available, or other description	_	Duplex or multi-unit building		ed claims on <i>Schedule D:</i>
			Condominium or cooperative	Creditors Who Have Cla	ims Secured by Property.
			Condominant of cooperative		
		П	Manufactured or mobile home		
Moneov	NY 10952-0000	_		Current value of the	Current value of the
Monsey		_ 📙	Land	entire property?	portion you own?
City	State ZIP Code		Investment property	\$500,000.00	\$500,000.00
			Timeshare	Describe the nature of	your ownership interest
			Other	(such as fee simple, ter	nancy by the entireties, or
		Who	has an interest in the property? Check one	a life estate), if known.	
			Debtor 1 only		
Rockland			Debtor 2 only		
County			Debtor 1 and Debtor 2 only		
			•	Check if this is cor	mmunity property
			At least one of the debtors and another	(see instructions)	
			r information you wish to add about this ite	m, such as local	
		prope	erty identification number:		
2. Add the dollar	ar value of the portion you own for	or all of	your entries from Part 1, including any	entries for	# F00 000 00
pages you h	ave attached for Part 1. Write tha	t numbe	r here		\$500,000.00
Part 2: Describe	Your Vehicles				
Describe	Tour vernicles				
			ny vehicles, whether they are registere Schedule G: Executory Contracts and Uni		rehicles you own that
_	ucks, tractors, sport utility vehicle	es, moto	orcycles		
■ No					
☐ Yes					

Official Form 106A/B Schedule A/B: Property page 1

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Official Form 106A/B Schedule A/B: Property page 2

Clothing (Female), Coats (Female), Shoes (Female), Purses.

☐ No

Yes. Describe.....

\$90.00

17-22964-rdd Doc 20 Filed 09/01/17 Entered 09/01/17 16:31:09 Main Document Pg 12 of 50 Debtor 1 Case number (if known) 17-22964 Caren Litkowski 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$1,000.00 Wedding band (Female), Ring, Earrings 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,274,00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ■ No ☐ Yes..... Institution name: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

☐ Yes. List each account separately.

Type of account:

Institution name:

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Case number (if known) 17-22964

22. Security deposits and prepayments

		Whole Life Insurance Face value: \$250,000.00	Nathan Litkowski	\$0.00
	■ Yes. Name the ins	urance company of each policy and list its value Company name:	e. Beneficiary:	Surrender or refund value:
31.	□ No	isability, or life insurance; health savings accou	unt (HSA); credit, homeowner's, or renter's insuran	ce
	☐ Yes. Give specific	information		
	benefits; No	unpaid loans you made to someone else	,	·
30.		vages, disability insurance payments, disability	benefits, sick pay, vacation pay, workers' compen	sation, Social Security
	■ No □ Yes. Give specific	information		
29.	Family support Examples: Past due	or lump sum alimony, spousal support, child so	upport, maintenance, divorce settlement, property	settlement
	■ No □ Yes. Give specific	information about them, including whether you	already filed the returns and the tax years	
28.	Tax refunds owed t	o you		·
M	oney or property owe	ed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	☐ Yes. Give specific	information about them		
27.		s, and other general intangibles permits, exclusive licenses, cooperative associated aso	ation holdings, liquor licenses, professional license	es
	■ No □ Yes. Give specific	information about them		
26.	Examples: Internet of	, trademarks, trade secrets, and other intelled domain names, websites, proceeds from royalti		
	■ No □ Yes. Give specific	information about them		
25.	Trusts, equitable or	future interests in property (other than any	thing listed in line 1), and rights or powers exe	rcisable for your benefit
	■ No □ Yes	Institution name and description. Separately fi	le the records of any interests.11 U.S.C. § 521(c):	
24.	26 U.S.C. §§ 530(b)(ation IRA, in an account in a qualified ABLE 1), 529A(b), and 529(b)(1).	program, or under a qualified state tuition program	gram.
	☐ Yes	Issuer name and description.		
23.	Annuities (A contract ■ No	ct for a periodic payment of money to you, eithe	r for life or for a number of years)	
	☐ Yes	Institution	on name or individual:	
	■ No	ints with landlords, prepald rent, public utilities ((electric, gas, water), telecommunications compani	les, or others
22.		used deposits you have made so that you may		ing or others

Official Form 106A/B Schedule A/B: Property page 4

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Deb	tor 1	Caren Litkowski	1 g 14 01 30	Case number (if known)	17-22964
_	If you a	erest in property that is due you from someone are the beneficiary of a living trust, expect proceeds ne has died.		e currently entitled to rece	eive property because
	l Yes.	Give specific information			
_		against third parties, whether or not you have les: Accidents, employment disputes, insurance cl		d for payment	
	l Yes.	Describe each claim			
	No	ontingent and unliquidated claims of every nat Describe each claim	ure, including counterclaims of	the debtor and rights to	set off claims
		ancial assets you did not already list			
	No				
L	J Yes.	Give specific information		,	
36.		ne dollar value of all of your entries from Part 4 rt 4. Write that number here		s you have attached	\$0.00
Part	5: Des	scribe Any Business-Related Property You Own or Ha	ve an Interest In. List any real estate	in Part 1.	
_	No. Go	wn or have any legal or equitable interest in any busi to Part 6. o to line 38.	ness-related property?		
Part		scribe Any Farm- and Commercial Fishing-Related Propulow own or have an interest in farmland, list it in Part 1.	operty You Own or Have an Interest I	n.	
	_ `	own or have any legal or equitable interest in	any farm- or commercial fishing-	related property?	
	_	Go to Part 7. Go to line 47.			
	— 103.	G0 t0 line 47.			
Part	7:	Describe All Property You Own or Have an Interest i	n That You Did Not List Above		
_		have other property of any kind you did not all les: Season tickets, country club membership	ready list?		
		Give specific information			
54.	Add t	ne dollar value of all of your entries from Part 7	. Write that number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$500,000.00
56.	Part 2	: Total vehicles, line 5	\$0.00		
57.		: Total personal and household items, line 15	\$3,274.00		
58.		: Total financial assets, line 36	\$0.00		
59.		: Total business-related property, line 45	\$0.00		
60.		: Total farm- and fishing-related property, line			
61.	Part 7	: Total other property not listed, line 54	+\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$3,274.00	Copy personal property to	otal \$3,274.00
63.	Total	of all property on Schedule A/B. Add line 55 + lin	ne 62		\$503,274.00

Official Form 106A/B Schedule A/B: Property page 5

Fill in this infor	mation to identify your		1 (1 1.7 (11 .)()	
FIII IN this infor	mation to identify your	case:		
Debtor 1	Caren Litkowski			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF NEW YORK	
Case number	17-22964			
(if known)				

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt								
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.						
	You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.						
	196 Grandview Ave Monsey, NY 10952 Rockland County	\$500,000.00		\$165,550.00	NYCPLR § 5206					
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit						
	Stove, Microwave, Refridgerator,	\$1,974.00		\$1,974.00	NYCPLR § 5205(a)(5)					
	Dishwasher, Dryer, Barbecue Grill, Washer, Toaster Oven, Blender, Crock pot, Coffee Maker,Iron, Fan, Breakfast Table, Breakfast Chairs, Dinnerware, Flateware, Pots/pans, Knives, Glassware, Utensiles, Dininf room table, Chin Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit						
	Cell phones, clock radio Line from Schedule A/B: 7.1	\$210.00		\$210.00	NYCPLR § 5205(a)(5)					
	Line from Scriedule AVB. 1.1			100% of fair market value, up to any applicable statutory limit						
	Clothing (Female), Coats (Female),	\$90.00		\$90.00	NYCPLR § 5205(a)(5)					
	Shoes (Female), Purses. Line from Schedule A/B: 11.1			100% of fair market value, up to						

Doc 20 Filed 09/01/17 Entered 09/01/17 16:31:09 Pg 16 of 50 Debtor 1 Caren Litkowski Case number (if known) 17-22964 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Wedding band (Female), Ring, NYCPLR § 5205(a)(6) \$1,000.00 \$1,000.00 **Earrings** 100% of fair market value, up to Line from Schedule A/B: 12.1 any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Main Document

17-22964-rdd

Yes

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Fill in this information to identify your case:							
Debtor 1	Caren Litkowski						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF NEW YORK				
Case number (if known)	17-22964						

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit Name, Numb	h whom you have the coer, Street, City, State and ZIP Coo	ontract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	

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Fill in this i	nformation to identify your	case:			
Debtor 1	Caren Litkowski				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	SOUTHERN DISTRICT	OF NEW YORK		
Case number	er 17-22964				
(if known)					Check if this is an
					amended filing
Official	Form 106H				
		1.4			
Schedi	ule H: Your Cod	ebtors			12/15
■ No □ Yes 2. Withit Arizona ■ No. Co	in the last 8 years, have you, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spou	I lived in a community pr Nevada, New Mexico, Pu	r operty state or territo lerto Rico, Texas, Wash	r y? (Community property	states and territories include
in line 2 Form 1 out Col	2 again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guaran Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed the 06G). Use Schedule D, S	
				☐ Schedule G, line	
	umber Street ity	State	ZIP Code	_	
3.2 N	ame			□ Schedule D, line □ Schedule E/F, lin □ Schedule G, line	e
	umbor Ctroot			_	
	umber Street ity	State	ZIP Code		

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Fill	in this information to identify your c	250.							
	otor 1 Caren Litko								
	otor 2				_				
Uni	ted States Bankruptcy Court for the	: SOUTHERN DISTRIC	T OF NEW YORK		_				
Cas	se number 17-22964				С	heck if this is:	· ·		
(If kr	nown)		-			An amende	ed filing		
							ent showing postp as of the following		er
0	fficial Form 106I					MM / DD/ Y	/YYY		
S	chedule I: Your Inc	ome						1	2/15
atta Par	the Describe Employment								
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-filing sp	ouse	
	If you have more than one job,	Employment status	☐ Employed			■ Empl	oyed		
	attach a separate page with information about additional	Employment status	■ Not employed			☐ Not e	mployed		
	employers.	Occupation				Real Es	state Managem	ent	
	Include part-time, seasonal, or self-employed work.	Employer's name				Ninety-	Nine Investme	nts LLC	
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed the	here?						
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If y	you have nothing to	report for	any line, v	vrite \$0 in the	space. Include yo	our non-filing	j
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	on for all e	mployers	for that perso	on the lines bel	ow. If you ne	ed
					For	Debtor 1	For Debtor 2 on non-filing spo		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$14,98	7.27	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$ 14.987	27	

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Deb	tor 1	Caren Litkowski	-	Cas	se number (if known)	_17	-22964		
	Cop	by line 4 here	4.	\$	or Debtor 1		or Debtor on-filing s		
5.	List	all payroll deductions:							
0.	5a.	Tax, Medicare, and Social Security deductions	5a	. \$	0.00	\$	2	,997.45	5
	5b.	Mandatory contributions for retirement plans	5b		0.00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	5c		0.00	\$		0.00	
	5d.	Required repayments of retirement fund loans	5d	. \$	0.00	\$		0.00	0
	5e.	Insurance	5e	. \$	0.00	\$		0.00	0
	5f.	Domestic support obligations	5f.		0.00	\$		0.00	
	5g.	Union dues	5g		0.00	\$		0.00	
	5h.	Other deductions. Specify:	_ 5h	•	0.00		-	0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$,997.45	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	11,	,989.82	2
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	. \$	0.00	\$		0.00	n
	8b.	Interest and dividends	8b		0.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		•					<u>-</u>
	8d.	settlement, and property settlement. Unemployment compensation	8c. 8d		0.00	\$ \$		0.00	_
	8e.	Social Security	8e	1	0.00	\$		0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:			0.00	\$		0.00	_
	8g.	Pension or retirement income	_ 8g	. \$	0.00	\$		0.00	0
	8h.	Other monthly income. Specify:	_ 8h	.+ \$	0.00	+ \$		0.00	0
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$		0.0	00
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	0.00 + \$	1	1,989.82	= \$	11,989.82
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		· —					11,000.02
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not exify:	depe				n <i>Schedule</i>	∍ J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies						\$	11,989.82
13.	Do	you expect an increase or decrease within the year after you file this form	?					Comb	ined nly income
- '		No. Yes. Explain:							

Official Form 106I Schedule I: Your Income page 2

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Fill	in this information to identify your case:				
Deb	otor 1 Caren Litkowski		Che	ck if this is:	
				An amended filing	
Deb	otor 2				ving postpetition chapter
(Spo	ouse, if filing)			13 expenses as of	the following date:
Unit	red States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW Y	ORK		MM / DD / YYYY	
	nown) 17-22964				
Of	fficial Form 106J				
Sc	chedule J: Your Expenses				12/1
Be info nur	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this fo mber (if known). Answer every question.				
Par 1.	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household? □ No	on Company to Mayoraha	old of Dob		
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for	or Separate Housend	ola ot Dec	otor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Pes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?
	Do not state the dependents names.				☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes
					□ No
3.	Do your expenses include No				☐ Yes
	expenses of people other than yourself and your dependents?				
exp	t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless you benses as of a date after the bankruptcy is filed. If this is a supple blicable date.				
the	lude expenses paid for with non-cash government assistance if y value of such assistance and have included it on <i>Schedule I: Yo</i> ficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. Including payments and any rent for the ground or lot.	clude first mortgage	4. \$.	0.00
	If not included in line 4:				
			4 - 4	•	0.00
	4a. Real estate taxes4b. Property, homeowner's, or renter's insurance		4a. \$ 4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		40. 3	·	800.00 250.00
	4d. Homeowner's association or condominium dues		4d. 3	·	0.00
5.	Additional mortgage payments for your residence, such as hom	e equity loans	5.		0.00

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btor 1	Caren Litkowski	Case numb	er (if known)	17-22964
Utilit	ies:			
6a.	Electricity, heat, natural gas	6a.	\$	250.00
6b.	Water, sewer, garbage collection	6b.	\$	115.00
6c.	Telephone, cell phone, Internet, satellite, and cable services		\$	115.00
6d.	Other. Specify:		\$	0.00
	I and housekeeping supplies		\$	1,100.00
	lcare and children's education costs		\$ 	
		_	*	0.00
	ning, laundry, and dry cleaning	_	\$	228.00
	onal care products and services		\$	50.82
	cal and dental expenses	11.	\$	2,500.00
	sportation. Include gas, maintenance, bus or train fare.	12.	¢	300.00
	ot include car payments.		·	
	rtainment, clubs, recreation, newspapers, magazines, and books		\$	42.00
	itable contributions and religious donations	14.	\$	0.00
. Insu				
	ot include insurance deducted from your pay or included in lines 4 or 20.		•	_
	Life insurance	15a.		0.00
	Health insurance	15b.	·	0.00
15c.	Vehicle insurance	15c.	\$	0.00
15d.	Other insurance. Specify:	15d.	\$	0.00
. Taxe	s. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spec	ify:	16.	\$	0.00
. Insta	Ilment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2	17b.	\$	0.00
	Other Specify	17c.	\$	0.00
	Other. Specify:	17d.	·	0.00
	payments of alimony, maintenance, and support that you did not report a		Ψ	0.00
	icted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I)		\$	0.00
	r payments you make to support others who do not live with you.	<i>,</i> .	\$	0.00
Spec		19.	Ψ	0.00
	r real property expenses not included in lines 4 or 5 of this form or on Sci		ır İncome	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
			·	
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
l. Othe	r: Specify: Postage	21.	+\$	12.00
Pets			+\$	27.00
	ulate your monthly expenses		•	
	Add lines 4 through 21.		\$	5,789.82
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	5,789.82
	, , ,	L		
	ulate your monthly net income.		•	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		11,989.82
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	5,789.82
		Г		·
23c.	Subtract your monthly expenses from your monthly income.	00 -	¢	£ 200 00
	The result is your monthly net income.	23c.	\$	6,200.00
For ex	ou expect an increase or decrease in your expenses within the year after transple, do you expect to finish paying for your car loan within the year or do you expect you cation to the terms of your mortgage?			ease or decrease because
For ex	cample, do you expect to finish paying for your car loan within the year or do you expect yo cation to the terms of your mortgage?			ease or decrease because

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Caren Litkowski	Middle News	LankNama	
Debtor 2 (Spouse if, filing)	First Name	Middle Name Middle Name	Last Name Last Name	
, , ,	ankruptcy Court for the:	SOUTHERN DISTRICT		
Case number	17-22964			
(if known)				Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below		
d you pay or agree to pay someone who is NOT an	attorney to help you fill out ban	kruptcy forms?
No		
Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
they are true and correct. /s/ Caren Litkowski	X	
Signature of Debtor 1	Signature of De	optor 2
	d you pay or agree to pay someone who is NOT and No Yes. Name of person der penalty of perjury, I declare that I have read the at they are true and correct. /s/ Caren Litkowski Caren Litkowski	d you pay or agree to pay someone who is NOT an attorney to help you fill out ban No Yes. Name of person der penalty of perjury, I declare that I have read the summary and schedules filed with they are true and correct. /s/ Caren Litkowski Caren Litkowski Signature of De

Official Form 106Dec

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Fill	in this info	rmation to identify you	case:			
Del	otor 1	Caren Litkowski				
D . I	0	First Name	Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States B	ankruptcy Court for the:	SOUTHERN DISTRICT O	OF NEW YORK		
Cas	se number	17-22964				
(if kr	nown)	22001				Check if this is an amended filing
Sta	atemen		Affairs for Individ		ankruptcy equally responsible for sup	4/16
info	rmation. If		attach a separate sheet to		additional pages, write yo	
Par		Details About Your Ma	rital Status and Where You	Lived Before		
١.	what is yo	ur current maritai statu	5 ?			
	■ Marrie □ Not ma					
2.	During the	last 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. L	ist all of the places you li	ved in the last 3 years. Do no	ot include where you live now		
	Debtor 1 F	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territor co, Texas, Washington and V	
	■ No	***		W : 15 (001)		
	☐ Yes. N	lake sure you fill out Sch	nedule H: Your Codebtors (Of	Ticiai Form 106H).		
Par	t 2 Expl	ain the Sources of You	r Income			
4.	Fill in the to	tal amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
	Yes. F	ill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	· last calend nuary 1 to D	lar year: December 31, 2016)	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Pg 25 of 50 Case number (if known) 17-22964 Debtor 1 Caren Litkowski Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For the calendar year before that: \$0.00 ☐ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? \square No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment** Total amount Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and

of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for alimony.

No

Yes. List all payments to an insider.

Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment still owe paid

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	Caron Zinkowom				, <u></u>	
8.	Within 1 year before you filed for bankrupto	y did you make any nay	ments or transfer	any property on	account of a de	eht that henefited an
0.	insider? Include payments on debts guaranteed or cosi			any property on	. account of a a	
	■ No□ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment litor's name
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.					
	□ No■ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the case	
	TRI STATE LOAN ACQUISITIONS vs. LITKOWSKI, CAREN 0033977/2011		Rockland Supr	eme Court	☐ Pending☐ On appe☐ Conclud	eal
	 Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below. Creditor Name and Address 	Describe the Property Explain what happene	d	Da	te	Value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.	tcy, did any creditor, inc		nancial instituti	on, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Da ¹	te action was	Amount
12.	 2. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes 				efit of creditors, a	
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gift	s with a total value	of more than \$	600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts			tes you gave e gifts	Value
	Person to Whom You Gave the Gift and					

Address:

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btor 1	Caren Litkowski		1 9 27 01 30	Case number	(if known) 17-2296	4
Withi	n 2 years before you filed for bankr	uptcy, d	id you give any gifts or contribution	ons with a tota	al value of more tha	an \$600 to any charity?
_		• •	, , , , ,			
	Yes. Fill in the details for each gift or c	ontribution	on.			
		total	Describe what you contributed		Dates you contributed	Value
Char	rity's Name					
Addi	ress (Number, Street, City, State and ZIP Code	e)				
rt 6:	List Certain Losses					
		ptcy or	since you filed for bankruptcy, did	you lose any	thing because of th	neft, fire, other disaster
	No					
	Yes. Fill in the details.					
		Describ	e any insurance coverage for the	loss	Date of your	Value of property
how	the loss occurred				loss	lost
-4 -7-	List Cartain Barresonta an Transferra		ce claims on line 33 of Schedule A/E	s. I Toperty.		
τ /:	List Certain Payments or Transfers	S				
				ur behalf pay	or transfer any pro	perty to anyone you
				ervices require	d in your bankruptcy	<i>/</i> .
	No.					
_ `						
Pers	on Who Was Paid		Description and value of any pro	perty	Date payment	Amount of
			transferred		or transfer was	payment
		ou ′			maue	
Cred	dit Counseling		\$25			\$25.00
prom	ised to help you deal with your cred	ditors or	to make payments to your creditor		or transfer any pro	perty to anyone who
_		,				
_						
			Description and value of any pro	nertv	Date payment	Amount of
			transferred	po. 5,	or transfer was	payment
					made	
				nsfer any pro	perty to anyone, ot	her than property
Includ	de both outright transfers and transfers	s made a	s security (such as the granting of a	security intere	st or mortgage on yo	our property). Do not
_	· ,	eady list	ed on this statement.			
_	• • •					
			Description and value of	Describe	any property or	Date transfer was
			property transferred	payments	s received or debts	
Pers	on's relationship to you			paid in ex	ccnange	
benef	ficiary? (These are often called asset			self-settled tr	ust or similar devic	ce of which you are a
_						
			Description and value of the proj	perty transfer	red	Date Transfer was
	Gifts more Character Add or gas how to the Consum C	Within 2 years before you filed for bankrumore than \$600 Charity's Name Address (Number, Street, City, State and ZIP Codd to List Certain Losses Within 1 year before you filed for bankrumore gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Within 1 year before you filed for bankrumore support of the property you lost and how the loss occurred Within 1 year before you filed for bankrumore support of the property you lost and how the loss occurred No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Credit Counseling Within 1 year before you filed for bankrumore of you have also and the property of the pr	Within 2 years before you filed for bankruptcy, d No Yes. Fill in the details for each gift or contribution Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Tig: List Certain Losses Within 1 year before you filed for bankruptcy or sor gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Include insurance Tig: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, dicconsulted about seeking bankruptcy or preparint Include any attorneys, bankruptcy petition preparers No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Credit Counseling Within 1 year before you filed for bankruptcy, dicpromised to help you deal with your creditors or Do not include any payment or transfer that you listed No Yes. Fill in the details. Person Who Was Paid Address Within 2 years before you filed for bankruptcy, diransferred in the ordinary course of your busine include both outright transfers and transfers made a include gifts and transfers that you have already listed No Yes. Fill in the details. Person Who Received Transfer Address Person's relationship to you Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protection No Yes. Fill in the details.	Within 2 years before you filed for bankruptcy, did you give any gifts or contribution. No	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total No Secretary's Name Describe what you contributed Secretary's Name Secretary Secretary's Name Secretary Secretary's Name Secretary S	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more the loss. Within 2 years before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of the for gramman and the details. Describe what you contributed Dates you contribution. Dates you contributed Dates you for you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of the you feel the property you lost and how the loss occurred Date of your loss Date of your bankruptcy Date of your bankruptcy Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy Date payment or transfer was made Described any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy Include any attorneys, bankruptcy, did you or anyone else acting on your behalf pay or transfer any propromised to help you deal with your creditors or to make payments to your creditors? Doet on flouded any payment or transfer that you listed on line 16. No Yes, Fill in the details. Described any property or payments or transfer any property or payments or transfer was made Described on the ordinary course of your business or financial affairs? Include

Official Form 107

made

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Debtor 1 Caren Litkowski Case number (if known) 17-22964

Par	t 8: List of Certain Financial Accounts, Ins	truments, Safe Depos	it Boxes, and Sto	orage Unit	s	
	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, association No	, were any financial acrou	ccounts or instru	iments he	ld in your name, or for yo	, ,
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository cash, or other valuables?No				ory for securities,		
	Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents				y? Do you still		
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, State and ZIP Code)		20001180		have it?
	Do you hold or control any property that sor for someone. No Yes. Fill in the details.		lude any propert	y you borr	owed from, are storing fo	or, or hold in trust
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value
	t 10: Give Details About Environmental Info					
FOI ■	the purpose of Part 10, the following definition Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these	or local statute or reg e air, land, soil, surfac	e water, ground			
					or utilize it or used	
	Hazardous material means anything an envi hazardous material, pollutant, contaminant,		as a hazardous	waste, ha	zardous substance, toxic	substance,
·	ort all notices, releases, and proceedings that Has any governmental unit notified you that			•		nental law?
	■ No	, ,	,			
	Yes. Fill in the details. Name of site Address (Number Street City, State and 7/9 Code)	Governmental ur	nit	Enviro	onmental law, if you	Date of notice

ZIP Code)

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> _. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

■ No

☐ Yes. Name of Person

Official Form 107

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Debtor 1 Caren Litkowski Case number (if known) 17-22964

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Fill in this information to identify your case:				
United States Bankruptcy Court for the:				
SOUTHERN DISTRICT OF NEW YORK				
Case number (if known):	17-22064			
Case number (if known): 17-22964				

Official Form 121

Statement About Your Social Security Numbers

12/15

Use this form to tell the court about any Social Security or federal Individual Taxpayer Identification numbers you have used. Do not file this form as part of the public case file. This form must be submitted separately and must not be included in the court's public electronic records. Please consult local court procedures for submission requirements.

To protect your privacy, the court will not make this form available to the public. You should not include a full Social Security Number or Individual Taxpayer Number on any other document filed with the court. The court will make only the last four digits of your numbers known to the public. However, the full numbers will be available to your creditors, the U.S. Trustee or bankruptcy administrator, and the trustee assigned to your case.

		out Yourself and Your spouse if Your Spouse is Filing For Debtor 1:	For Debtor 2 (Only if Spouse is Filing:)
1.	Your name	Caren	
		First name	First name
		Middle name	Middle name
		Last name	Last name
Par	t 2: Tell the Court Abo	out all of Your Social Security or Federal Individual Tax	payer Identification Numbers
2.	All Social Security Numbers you have used	101-60-7872	
		☐ You do not have a Social Security Number	☐ You do not have a Social Security Number
3.	All federal Individual Taxpayer Identification		
	Numbers (ITIN) you have used	■ You do not have an ITIN.	☐ You do not have an ITIN.
Par	t 3: Sign Below		
		Under penalty of perjury, I declare that the information I have provided in this form is true and correct.	Under penalty of perjury, I declare that the information I have provided in this form is true and correct.
		X /s/ Caren Litkowski	X
		Caren Litkowski Signature of Debtor 1	Signature of Debtor 2
		Date September 1, 2017	Date

Fill in this information to identify your case:				
Debtor 1	Caren Litkowski			
Debtor 2 (Spouse, if filing)				
United States Bankruptcy Court for the: Southern District of New York				
Case number 17-22964				

Check as directed in lines 17 and 21:					
According to the calculations required by this Statement:					
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).				
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).				
	3. The commitment period is 3 years.				
	4. The commitment period is 5 years.				

■ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A. lines 2-11. Married. Fill out both Columns A and B, lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 0.00 14,987.27 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not 0.00 0.00 filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 Gross receipts (before all deductions) \$ -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Caren Litkowski 17-22964 Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 \$ 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you_____ 0.00 For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10, Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 0.00 14,987.27 14,987.27 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 14.987.27 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. +\$ 0.00 0.00 Copy here=> 14,987.27 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 14.987.27 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 179,847.24 15b. The result is your current monthly income for the year for this part of the form.

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Pa 34 of 50 Caren Litkowski 17-22964 Debtor 1 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: NY 16a. Fill in the state in which you live. 16b. Fill in the number of people in your household. 2 66.056.00 16c. Fill in the median family income for your state and size of household. \$ To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. 14,987.27 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 14,987.27 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 14,987.27 20a. Copy line 19b Multiply by 12 (the number of months in a year). **x** 12 179,847.24 \$ 20b. The result is your current monthly income for the year for this part of the form 66,056.00 20c. Copy the median family income for your state and size of household from line 16c \$ 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Caren Litkowski

Part 4:

Caren Litkowski

Signature of Debtor 1

Date September 1, 2017

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Fill in this info	rmation to identify your case:	
Debtor 1	Caren Litkowski	
Debtor 2 (Spouse, if filing	g)	
United States E	Sankruptcy Court for the: Southern District of New York	
Case number (if known)	17-22964	■ Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/16

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C–1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 1,132.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

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Caren Litkowski 17-22964 Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 2 7c. Subtotal. Multiply line 7a by line 7b. 98.00 Copy here=> 98.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 117 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 0.00 Copy here=> 7g. Total. Add line 7c and line 7f 98.00 98.00 Copy total here=> \$ Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 702.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 2,500.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment -NONE-Сору Repeat this amount 0.00 0.00 9b. Total average monthly payment on line 33a. here=> 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 2,500.00 2,500.00 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and

Explain why:

affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

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17-22964 Caren Litkowski Debtor 1 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 598.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 **Describe Vehicle 1:** 13a. Ownership or leasing costs using IRS Local Standard..... 0.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Average monthly Name of each creditor for Vehicle 1 payment -NONE-Repeat this Copy amount on Total Average Monthly Payment 0.00 0.00 here => Copy net 13c. Net Vehicle 1 ownership or lease expense Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. expense here 0.00 0.00 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment -NONE-Сору Repeat this here amount on line Total average monthly payment 0.00 0.00 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation.

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may

0.00

not claim more than the IRS Local Standard for Public Transportation.

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Debtor 1 Caren Litkowski Case number (if known) 17-22964

		addition to the expense defollowing IRS categories		listed above	, you are allowed your monthly expenses	for	
16.	self-employment taxes, socia	security taxes, and Medic rever, if you expect to rece to the total monthly amount	are taxes. ive a tax r	You may inc efund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from just divide the expected refund by 12 for taxes.	\$	2,997.45
17.	Involuntary deductions: The contributions, union dues, and		uctions tha	at your job re	quires, such as retirement		
			o, such as	voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	filing together, include payme	nts that you make for your ife insurance on your depe	spouse's	term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	0.00
19.	Court-ordered payments: To administrative agency, such a Do not include payments on p	s spousal or child support	payments	s	by the order of a court or You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly	amount that you pay for e	ducation	that is either i	required:		
	as a condition for your job	or					
	for your physically or ment	ally challenged dependent	child if no	public educ	ation is available for similar services.	\$	0.00
21.	Childcare: The total monthly Do not include payments for a				sitting, daycare, nursery, and preschool.	\$	0.00
22.	that is required for the health by a health savings account.	and welfare of you or your nclude only the amount th	dependei at is more	nts and that is than the tota		\$	0.00
00	Payments for health insurance	· ·				Ψ_	
23.	for you and your dependents, phone service, to the extent n income, if it is not reimbursed Do not include payments for the	such as pagers, call waiting ecessary for your health a by your employer. basic home telephone, inte	ng, caller ind welfare	dentification, e or that of you	you pay for telecommunication services special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment ount you previously deducted.	+\$	0.00
24.	Add all of the expenses allowed Add lines 6 through 23.	wed under the IRS expe	nse allow	ances.		\$	8,027.45
		wed under the IRS expension These are additional de Note: Do not include a	eductions	allowed by th		\$	8,027.45
Add	Add lines 6 through 23. itional Expense Deductions Health insurance, disability	These are additional de Note: Do not include a insurance, and health sa	eductions ny expens avings ac	allowed by the allowances			8,027.45
Add	Add lines 6 through 23. itional Expense Deductions Health insurance, disability insurance, disability insurance.	These are additional de Note: Do not include a insurance, and health sa	eductions ny expens avings ac	allowed by the allowances	s listed in lines 6-24. ses. The monthly expenses for health		8,027.45
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents.	These are additional de Note: Do not include a insurance, and health sa	eductions ny expens avings ac unts that a	allowed by the allowances count expendance reasonab	s listed in lines 6-24. ses. The monthly expenses for health		8,027.45
Add	Add lines 6 through 23. itional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance	These are additional d Note: Do not include a insurance, and health sa e, and health savings acco	eductions ny expens avings ac unts that	allowed by the allowances count expenser reasonab	s listed in lines 6-24. ses. The monthly expenses for health		8,027.45
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance	These are additional d Note: Do not include a insurance, and health sa e, and health savings acco	eductions ny expens avings ac unts that	allowed by the allowances count expensare reasonab 0.00 0.00	s listed in lines 6-24. ses. The monthly expenses for health		0.00
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this total	These are additional dinate. Note: Do not include a insurance, and health sate, and health sate, and health savings according to the savings accor	eductions ny expens avings ac unts that \$	allowed by the allowances count expensare reasonab 0.00 0.00 0.00	s listed in lines 6-24. ses. The monthly expenses for health ly necessary for yourself, your spouse, o	r	
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total	These are additional dinate. Note: Do not include a insurance, and health sate, and health sate, and health savings according to the savings accor	eductions ny expens avings ac unts that \$	allowed by the allowances count expensare reasonab 0.00 0.00 0.00	s listed in lines 6-24. ses. The monthly expenses for health ly necessary for yourself, your spouse, o	r	
Add 25.	Add lines 6 through 23. Itional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this tot No. How much do you yes Continued contributions to continue to pay for the reason	These are additional dinates are additional dinates. Do not include a insurance, and health say, and health savings according a decident and a dinates. The care of household on the care of househo	syings acunts that a	allowed by the eallowances count expensare reasonab 0.00 0.00 0.00 0.00 embers. The out of an elder et o pay for s	c actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may	r	
25.	Add lines 6 through 23. Itional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this tot No. How much do you Yes Continued contributions to continue to pay for the reasor your household or member of include contributions to an ac Protection against family vi	These are additional di Note: Do not include a insurance, and health sa e, and health savings according a display and health savings according to the care of household or able and necessary care a your immediate family who count of a qualified ABLE polence. The reasonably necessary care and the care of household or a pour immediate family who count of a qualified ABLE polence. The reasonably necessary care and the care of household or a polence of the care of household or a polence.	sunds that a	allowed by the allowances count expensare reasonab 0.00 0.00 0.00 0.00 0.00 embers. The ort of an elder e to pay for see to	c actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may	r\$	0.00

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ebtor 1	Caren Litkowski	Cas	se number (<i>if kn</i> d	own)	17-2	2964			
	Additional home energy costs. Your hom line 8.	ne energy costs are included in your insurance	e and operat	ing	expense	es on			
	If you believe that you have home energy of 8, then fill in the excess amount of home en	costs that are more than the home energy cosnergy costs	sts included in	n ex	penses	on line	е		
	You must give your case trustee document amount claimed is reasonable and necessations.	ation of your actual expenses, and you must ary.	show that the	e ad	ditional		(\$	0.00
		dren who are younger than 18. The monthly ependent children who are younger than 18 younger th							
	You must give your case trustee document claimed is reasonable and necessary and it	ation of your actual expenses, and you must not already accounted for in lines 6-23.	explain why	the	amount				
	* Subject to adjustment on 4/01/19, and ev	ery 3 years after that for cases begun on or a	fter the date	of a	djustme	nt.	5	\$	0.00
		the monthly amount by which your actual food g allowances in the IRS National Standards. T es in the IRS National Standards.							
		ional allowance, go online using the link spec so be available at the bankruptcy clerk's office		ера	rate				
	You must show that the additional amount	claimed is reasonable and necessary.					9	\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable organizations.	e amount that you will continue to contribute in anization. 11 U.S.C. § 548(d)(3) and (4).	n the form of	cas	h or fina	ancial			
	Do not include any amount more than 15%	of your gross monthly income.					(.	0.00
	Add all of the additional expense deduc Add lines 25 through 31.	tions.					\$		0.00
Dedu	ections for Debt Payment								
	or debts that are secured by an interest pans, and other secured debt, fill in lines	in property that you own, including home 33a through 33e.	mortgages,	veh	nicle				
	o calculate the total average monthly paym reditor in the 60 months after you file for ba	ent, add all amounts that are contractually dunkruptcy. Then divide by 60.	ue to each se	cure	ed				
	Mortgages on your home							erage m	onthly
33a.	Copy line 9b here					=>	\$	yment	0.00
	Loans on your first two vehicles						Ť -		0.00
33b.	· ·					=>	\$		0.00
							· -		
33c.	Copy line 13e nere					=>	\$_		0.00
33d.	List other secured debts:								
Name	e of each creditor for other secured debt	Identify property that secures the debt		incl	es paym ude taxe nsuranc	es			
					No				
	-NONE-				Yes		Φ.		
				_	100		\$ _		
					No				
					Yes		\$_		
					No				
					Yes	+	φ		
				_	100	•	\$ _		
					0.00	Copy		•	0.00
33e	Total average monthly payment. Add lines	s 33a through 33d	\$		0.00	here:	=>	\$	0.00

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Caren Litkowski 17-22964 Debtor 1 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt **Total cure amount** Monthly cure amount $\div 60 = \$$ -NONE-\$ Сору 0.00 0.00 Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. The Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 0.00 ÷ 60 0.00 36. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total Average monthly administrative expense here=> 0.00 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 8,027.45 expense allowances Copy line 32, All of the additional expense deductions 0.00 Copy line 37, All of the deductions for debt payment 0.00 8,027.45 8.027.45 Total deductions..... Copy total here=>

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Caren Litkowski 17-22964 Debtor 1 Case number (if known) Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) Part 2: 39. Copy your total current monthly income from line 14 of Form 122C-1. Chapter 13 14.987.27 Statement of Your Current Monthly Income and Calculation of Commitment Period. 40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably 0.00 necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as 0.00 specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here => 8,027.45 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Describe the special circumstances Amount of expense Сору 0.00 0.00 Total \$ here=> \$ Copy 44. **Total adjustments.** Add lines 40 through 43. 8.027.45 8,027.45 here=> -\$ 6,959.82 45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. Part 3: Change in Income or Expenses 46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form Line Reason for change Date of change Increase or Amount of change decrease? ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease □ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease ☐ 122C-1 ☐ Increase ☐ 122C-2 Decrease

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Debtor 1	Caren Litkowski	Case number (if known)	17-22964
Part 4:	Sign Below		
E	By signing here, under penalty of perjury you declare that the information	on on this statement and in any att	achments is true and correct.
	/s/ Caren Litkowski Caren Litkowski Signature of Debtor 1		
Date	September 1, 2017 MM / DD / YYYY		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. 17-22964-rdd Doc 20 Filed 09/01/17 Entered 09/01/17 16:31:09 Main Document Pg 47 of 50

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of New York

In re	Caren Litkowski		Case No.	17-22964
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENSATION	ON OF ATTORNEY F	OR DEBTOR	(S) - AMENDED
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(tompensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	6,500.00
	Prior to the filing of this statement I have received		\$	6,500.00
	Balance Due		\$	0.00
2. T	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. T	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4. I	I have not agreed to share the above-disclosed compe	nsation with any other person u	inless they are memb	pers and associates of my law firm.
[I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name			
5. I	n return for the above-disclosed fee, I have agreed to ren	nder legal service for all aspects	of the bankruptcy ca	ase, including:
b c	Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor [Other provisions as needed] Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou	ment of affairs and plan which is and confirmation hearing, and educe to market value; exe is as needed; preparation	may be required; d any adjourned hear mption planning;	ings thereof; preparation and filing of
6. B	y agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.	does not include the following chargeability actions, judic	service: sial lien avoidance	es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of any nkruptcy proceeding.	agreement or arrangement for	payment to me for re	presentation of the debtor(s) in
	ptember 1, 2017	/s/ Linda Tirelli		
Do	rte	Linda Tirelli Signature of Attorney Tirelli & Wallshein 50 Main Street Suite 405 White Plains, NY 1 914-732-3222 Fax LTirelli@tw-lawgr	I, LLP 10606 (: 914-517-2696	

United States Bankruptcy Court Southern District of New York

In re	Caren Litkowski		Case No.	17-22964
		Debtor(s)	Chapter	13

VERIFICATION OF CREDITOR MATRIX - AMENDED

The abo	ove-named Debtor hereby verifies	that the attached list of creditors is true and correct to the best of his/her knowledge.
Date:	September 1, 2017	/s/ Caren Litkowski
		Caren Litkowski
		Signature of Debtor

AMEX CORRESPONDENCE PO BOX 981540 EL PASO, TX 79998

BANK OF AMERICA NC4-105-03-14 PO BOX 26012 GREENSBORO, NC 27410

BMW FINANCIAL SERVICES ATTN: BANKRUPTCY DEPARTMENT PO BOX 3608 DUBLIN, OH 43016

BSI FINANCIAL SERVICES 314 S FRANKLIN ST TITUSVILLE, PA 16354

CITI POB 6241 SIOUX FALLS, SD 57117

CITICARDS CBNA CITICORP CREDIT SVC PO BOX 790040 SAINT LOUIS, MO 63179

CITICARDS CBNA CENTRALIZED BANKRUPT PO BOX 790040 SAINT LOUIS, MO 63179

COMENITY BANK/LANE BRYANT ATTN: BANKRUPTCY PO BOX 182125 COLUMBUS, OH 43218

DISCOVER FINANCIAL PO BOX 3025 NEW ALBANY, OH 43054

DSNB BLOOMINGDALES ATTN: BANKRUPTCY PO BOX 8053 MASON, OH 45040 IRS P. O. BOX 7346 PHILADELPHIA, PA 19101-7346

NATIONSTAR MORTGAGE LLC ATTN: BANKRUPTCY 8950 CYPRESS WATERS BLVD COPPELL, TX 75019

NYS DEPT OF TAXATION & FINANCE BANKRUPTCY SECTION PO BOX 5300 ALBANY, NY 12205

SYNCHRONY BANK/ JC PENNEYS ATTN: BANKRUPTCY PO BOX 956060 ORLANDO, FL 32896

SYNCHRONY BANK/GAP ATTN: BANKRUPTCY PO BOX 956060 ORLANDO, FL 32896

TARGET
C/O FINANCIAL & RETAIL SRVS
MAILSTOPN BT POB 9475
MINNEAPOLIS, MN 55440

TRI-STATE III LLC C/O MARC WOHLGEMUTH & ASSOC. SPRING VALLEY, NY 10977